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L	Substitute for F mm PTO-875 Effective December 8, 2004										N	Application or Docker Humber			
L	APPLICATION AS FILED - PART I (Column 1) (Column 2) SMALL ENTITY												HEI	R THAN ENTITY	
Ļ	FOR	NUMBER FILED			NUMBER EXTRA			RATE (\$)	FEE (9427				
	BASIC FEE (37 CFR 1 16(a), (b), or (c))		N/A		N/A			NA	150.0	_	RATE (<u>.</u>	300.00		
SE (37	SEARCH FEE (37 CFR 1 16(N), (1), or (m))		, NA		. NIA		7	N/A	\$650						
ξX	EXAMINATION FEE (37 CFR 1-16(q), (p), or (q))		N/A			· NA		\dashv				N/A		\$500	
TC	TOTAL CLAIMS		C				4	N/A	\$100	_	N/A		\$200		
	(37 CFR 1 16(1)) INDEPENDENT CLAIMS		minus 20 =				4	X\$ 25 .		α	X\$50	•			
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MU	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))								+180=		7	+350-			
H	"if the difference in column 1 is less than zero, enter "O" in column 2.								TOTAL	300	, 1	TOTAL	7		
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AMENDMENT A	¥-4.1	REMA AFT AMEND		NG		SHEST IMBER VIOUSLY ID FOR	PRESENT EXTRA		RATE (\$)	ADDI- TIONAL FEE (\$)		RATE (5)		ADOI- TIONAL FEE (\$)	
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Ş	Application Size Fee (37 CFR 1.1			16(s))				ii	·		OR		╫		
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ş[Application Size Fee (37 CFR 1.16(s))							H		•	OR '	7200 a	-		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.160)								+180=		OR	+360=	†		
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The, "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

his collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the ISPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete. scluding gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments n the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent nd Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS DDRESS. SEND TO: Commissioner for Patents, P.O. B x 1450, Alexandria, VA 22313-1450.

nn 1 is less then the entry in column 2, write "0" in column 3.

[&]quot;If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". If the Highest Number Previously Pald For IN THIS SPACE is less than 3, enter "3".